MSFC COOPERATIVE EDUCATIONAL PROGRAM					WORK TERM (1st, 2nd, 3rd, or 4th, etc.)					
Supervisory Evaluation DATE										
Program: Secretarial Baccalaureate	☐ Gi	aduate Ph.D.								
Student's Name: Org. Symbol: Grade Level: College S		nomore [Ju	nior 🗌	Senior	GPA:				
Date of Work Period (From and To): Major Field Upon Entry	into Program:	Major Field of Study:								
Name of College or University Currently Attending: Supervisor's Name:		Mentor's Name:								
TO BE COMPLETED BY ORGANIZATION										
INSTRUCTIONS: The immediate supervisor will evaluate the student ob academic level; personnel assigned the same or similarly classified job; or			vith: \$	Students	of compa	arable				
B. Evaluate Student's Performance Determine the student's Total On-The-Job Training Score by marking the appropriate number. On a scale of 1 to 5, where 5 is high and 1 is low, rate the following attributes.										
Technical Abilities and Attitudes	SCALE	1	2	3	4	5				
1. Ability to follow directions and adhere to established regulations in the of the job.	performance		\bigcirc	\bigcirc	\bigcirc	\bigcirc				
2. Dependability/willingness to work.				\bigcirc	\bigcirc	\bigcirc				
3. Quality of work assignments.				\bigcirc		0				
4. Time management & ability to multitask.			\bigcirc	\bigcirc	\bigcirc	\bigcirc				
5. Ability to perform tasks with normal supervisory assistance, some indep	pendence.		\bigcirc	\bigcirc	\bigcirc	\bigcirc				
6. Interest in work/initiative/shows enthusiasm.			\bigcirc	\bigcirc	\bigcirc	\bigcirc				
7. Communication skills.			\bigcirc	\bigcirc	\bigcirc	\bigcirc				
8. Judgment and/or maturity.			\bigcirc	\bigcirc	\bigcirc	\bigcirc				
9. Attendance and punctuality.			\bigcirc	\bigcirc	\bigcirc	\bigcirc				
Demonstrates high degree of professionalism Dresses appropriately Conducts himself/herself in appropriate and professional manner										
The special section of the section o	Total On-Th	e-Job Trai	ning S	Score:						

C. Does this student show need for improvement	ent/change? If so, i	n what areas?	☐ YES ☐ I	NO				
D. D				- (N (A O A / N A I I I				
D. Do you recommend this student to return for Space Flight Center? (If "no", contact the Co-	or another work tern op Coordinator/Prov	ride reasons as an attach	ment to this form).	THE SAME TO SEE THE SE				
Remarks:								
This avaluation has been YES	NACA baa mu narn	nicaion to displace the inf	iormation furnished	on this form to any				
This evaluation has been discussed with the student.		nission to disclose the infividual having a valid reas						
Signature of Student:			Date:					
Signature (Immediate Supervisor):	ature (Immediate Supervisor): Signature (Mentor):							
TO BE COMPLETED BY MSFC CO-OP OFFICE								
Total On-The-Job Training Score: (From Page 1, Part B)								
Determine Academic Point Score:								
0 10 111 001								
Current Cumulataive GPA =		Ac	ademic Point Score					
3.51-3.75 = 45 Points 2.51-2.75	= 30 Points = 25 Points							
	= 20 Points = 15 Points							
Determine Academic Point Score:								
Determine Academic Four ocore.								
Total On-The-Job Training Score + Academ	ic Point Score		Work Phase Score	9				
Outstanding Control of	ooful	Turnes conful	Minimally					
Outstanding Highly Success (100-90) (89-80)		(79-70)	Successful (69-60)	Unsuccessful (59 and Below)				